

## PERMANENT WALL SIGN **CITY OF SPRINGFIELD**

PERMIT#	
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P. 615-380-8701

F. 615-382-1612

Job Address								
Owner				Contractor				
Address				Address				
Phone				Phone				
				License#				
Class of Work	New		_ Alteration					
Description of	f Work							
Valuation of Work:						Permit	t Fee	
Special Condition	ons							
Application Ac	ccepted by	Approved f	or Issuance by					
				OTICE				
THIS PERMIT BEO CONSTRUC			VORK OR CONST DED OR ABANDO					
	of work will be	e complied with	whether specified		e granting of	a permit does	s not presume	to give authority to
Signature of Owner (	(if Owner Builde	er)	Date					
Signature of Contractor or Authorized Agent Date			•					
	V	VHEN PROPER	RLY VALIDATED	(IN THIS SPACE)	, THIS IS YO	<b>UR PERMIT</b>	•	